

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 1: Cover Sheet

#### Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Individual Reporting Guide

This form must be submitted in its original digital format. Please do not print or scan this form.

LOBBYIST NAME	Title  Last Name*  Herring  My employe	First Name*  William  er is a 501c(3) non-profit organization	Suffix	Middle
EMPLOYING ENTITY	behalf Entity/Organiza	r is registered as a business entity, partion Name*  f, Stuart & Williams, LLP	ys an entity registrati	on fee, and is reporting on my
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Busing 221 West 6th State City* Austin	iness Street Address* t.	Apartment or #1300 State* TX	Suite Number  Zip Code*  78701
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailin 221 West 6th St City* Austin		Apartment or #1300 State* TX	Suite Number  Zip Code*  78701



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	☐ I am registering as a new lobbyist
	I am renewing my annual lobbyist registration
	I am updating my current registration information outside of a Quarterly Activity Reporting Period
REPORT TYPE *	I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:
Check all that apply	☐ January ☐ April ☐ July ☐ October
	☐ I am correcting the information provided on a previously filed report  Previous Report Type: Previous Report Date
	I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.



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## Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Munic	ipal Question, clic	k the "Add Additional Municipal	Question" button below.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to proposed zoning and any related site permits.				
PROPERTY ADDRESS	This municip	pal question pertains to real prop is required.	erty. *If checked, either a p		
OR	3101 and 3003 N	Manchaca	Suite of Apartine	int Number	
LEGAL DESCRIPTION					
	City		State	Zip Code	
	Austin		TX	78704	
	Property Legal D	escription			
Subject Matter(s)*: Check all su	bject matters tha	t apply to the municipal question	above		
Accessibility or Persons with	Disabilities	Environmental Matters, Air or Quality, or Watershed Protect		(Building, Site Plans)	
Affordability		Finance, Budget, or Investmen	nts Permits	(Other)	
Animals		Health, Healthcare, Mental Ho		afety, Policy, Fire, EMS, or ncy Planning and Response	
Annexation		Historic Preservation	Public U or Recyc	tilities, Energy, Water, Solid Waste ling	
Arts, Music, Film, Cultural or Creative Industries	r	Hospitality, Tourism, Events, of Center	or Convention Quality of	of Life Affairs	
Aviation		Human Rights or Immigration	Real Esta	ate	
City Infrastructure or Public	Works	Labor or Workforce	Rules, Pi	roposed Rules, or Rule Making	
Civil Service, Municipal Emp Retirement Systems	loyment, or		se Taxation	or Fees	
Code Compliance		Municipal Court	Technol	ogy or Communications	
Construction		Municipal Legislation	☐ Transpo	rtation or Mobility	
Contracts or Procurement		☐ Neighborhoods		or Platting	
Diversity, Equity, or Inclusion	n	Parks, Recreation, Libraries, o	r Museums		
Economic Development		Other:			



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To report more than one Mun	icipal Question, cli	ick the "Add Additional Municipal Question" bເ	utton below.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements rel	Entitlements related to rezoning and assistance with any site permitting.			
PROPERTY ADDRESS		ipal question pertains to real property. *If checonist required.	cked, either a prop		
OR	11500 Manchac		varie or repartment	vallise.	
LEGAL DESCRIPTION	City		State	Zip Code	
	Austin	1	гх	78748	
	Property Legal I	Description			
Subject Matter(s)*: Check all s	subject matters th	at apply to the municipal question above			
Accessibility or Persons wi	th Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)	
Affordability		Finance, Budget, or Investments	Permits (Ot	her)	
Animals		Health, Healthcare, Mental Health, or Human Services		ry, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste	
Arts, Music, Film, Cultural Creative Industries	or	Hospitality, Tourism, Events, or Convention Center	Quality of L		
Aviation		Human Rights or Immigration	Real Estate		
City Infrastructure or Publi	c Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making	
Civil Service, Municipal Em Retirement Systems	ployment, or	∑ Land Development or Land Use	Taxation or	Fees	
Code Compliance		Municipal Court	Technology	or Communications	
Construction		Municipal Legislation	☐ Transportat	cion or Mobility	
Contracts or Procurement		Neighborhoods	Zoning or P	latting	
Diversity, Equity, or Inclusi	on	Parks, Recreation, Libraries, or Museums			
Economic Development		Other:			



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To report more than one Munici	pal Question, clic	k the "Add Additiona	l Municipal Question" bւ	utton below.	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to site plan permitting and demolition permit by Historic Landmark Commission.				
PROPERTY ADDRESS	This municip	•	to real property. *If chec	cked, either a pr	
OR	1400 Lavaca				
LEGAL DESCRIPTION	City			State	Zip Code
	Austin		1	тх	78701
	Property Legal De	escription			
Subject Matter(s)*: Check all sub	bject matters that	apply to the munici	pal question above		
Accessibility or Persons with	Disabilities	Environmental N Quality, or Wate	Natters, Air or Water rshed Protection	Permits (I	Building, Site Plans)
Affordability		Finance, Budget,	or Investments	Permits (	Other)
Animals		Health, Healthca	re, Mental Health, or		fety, Policy, Fire, EMS, or cy Planning and Response
Annexation		Historic Preserva	ition	Public Uti or Recycli	ilities, Energy, Water, Solid Waste ing
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tour	ism, Events, or Convention	_	f Life Affairs
Aviation		☐ Human Rights or	Immigration	Real Esta	te
City Infrastructure or Public \	Works	Labor or Workfo	rce	Rules, Pro	oposed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	∠ Land Developme	ent or Land Use	Taxation	or Fees
Code Compliance		Municipal Court		Technolo	gy or Communications
Construction		Municipal Legisla	ation	Transport	tation or Mobility
Contracts or Procurement		Neighborhoods		Zoning or	Platting
Diversity, Equity, or Inclusion	1	Parks, Recreation	n, Libraries, or Museums		
Economic Development		Other:			



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To report more than one Munici	pal Question, clic	k the "Add Additior	nal Municipal Question" b	outton below.	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to site plan approval and permitting.				
PROPERTY ADDRESS	This municip description i		s to real property. *If che	ecked, either a	
OR DESCRIPTION	110 Academy				
LEGAL DESCRIPTION	City			State	Zip Code
	Austin			TX	78704
	Property Legal De	escription			
Subject Matter(s)*: Check all sul	bject matters that	apply to the muni	cipal question above		
Accessibility or Persons with	Disabilities		Matters, Air or Water tershed Protection	Permits	s (Building, Site Plans)
Affordability		Finance, Budge	et, or Investments	Permits	(Other)
Animals		Health, Healtho	care, Mental Health, or s		Safety, Policy, Fire, EMS, or ency Planning and Response
Annexation		Historic Preser	vation	Public U or Recy	Jtilities, Energy, Water, Solid Waste
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Too Center	urism, Events, or Convention		of Life Affairs
Aviation		Human Rights	or Immigration	Real Est	tate
City Infrastructure or Public \	Works	Labor or Work	orce	Rules, F	Proposed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or		nent or Land Use	Taxatio	n or Fees
Code Compliance		Municipal Cou	t	Techno	logy or Communications
Construction		Municipal Legis	slation	Transpo	ortation or Mobility
Contracts or Procurement		Neighborhoods	5	Zoning	or Platting
Diversity, Equity, or Inclusion	1	Parks, Recreati	on, Libraries, or Museums		
Economic Development		Other:			



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To report more than one Munic	ipal Question, clic	k the "Add Addition	nal Municipal Question" b	utton below.	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*		Entitlements related to zoning and site plan approval and permitting related to proposed Capitol View Corridor ordinance changes.			
PROPERTY ADDRESS	This municip description i	•	s to real property. *If che	ecked, either a p	, ,
OR	700 East 11th St.				
LEGAL DESCRIPTION	City			State	Zip Code
	Austin			TX	78701
	Property Legal De	escription			
Subject Matter(s)*: Check all su	bject matters that	apply to the muni	cipal question above		
Accessibility or Persons with	Disabilities		Matters, Air or Water tershed Protection	Permits	(Building, Site Plans)
Affordability		Finance, Budge	et, or Investments	Permits	(Other)
Animals		Health, Health Human Service	care, Mental Health, or s		afety, Policy, Fire, EMS, or ncy Planning and Response
Annexation		Historic Preser	vation	Public U	Itilities, Energy, Water, Solid Waste
Arts, Music, Film, Cultural or Creative Industries		Hospitality, To Center	urism, Events, or Convention		of Life Affairs
Aviation		Human Rights	or Immigration	Real Est	ate
City Infrastructure or Public	Works	Labor or Work	force	Rules, P	roposed Rules, or Rule Making
Civil Service, Municipal Empl Retirement Systems	oyment, or	∠ Land Developn	nent or Land Use	Taxation	n or Fees
Code Compliance		Municipal Cou	rt	Technol	ogy or Communications
Construction		Municipal Legi	slation	Transpo	rtation or Mobility
Contracts or Procurement		Neighborhood	S	Zoning o	or Platting
Diversity, Equity, or Inclusion	1	Parks, Recreati	on, Libraries, or Museums		
Economic Development		Other:			



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To report more than one Mun	icipal Question, cli	ick the "Add Additional Municipal Question" bu	ıtton below.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements rel	Entitlements related to site plan approval and permitting including permanent encroachment agreement.			
PROPERTY ADDRESS		ipal question pertains to real property. *If checonics required.			
OR	1011 South Con		Suite or Apartment I	Number	
LEGAL DESCRIPTION		-			
	City		State	Zip Code	
	Austin	I I	ГХ	78701	
	Property Legal I	Description			
Subject Matter(s)*: Check all s	subject matters th	at apply to the municipal question above			
Accessibility or Persons wit	th Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)	
Affordability		Finance, Budget, or Investments	Permits (Ot	her)	
Animals		Health, Healthcare, Mental Health, or Human Services		ry, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste	
Arts, Music, Film, Cultural of Creative Industries	or	Hospitality, Tourism, Events, or Convention Center	Quality of L	ife Affairs	
Aviation		Human Rights or Immigration			
City Infrastructure or Publi	c Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making	
Civil Service, Municipal Em Retirement Systems	ployment, or	□ Land Development or Land Use	Taxation or	Fees	
Code Compliance		Municipal Court	Technology	or Communications	
Construction		Municipal Legislation		cion or Mobility	
Contracts or Procurement		Neighborhoods	Zoning or P	latting	
Diversity, Equity, or Inclusi	on	Parks, Recreation, Libraries, or Museums			
Economic Development		Other:			



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To report more than one Mun	icipal Question, cl	ick the "Add Additional Municipal Question" bເ	ıtton below.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements rel	Entitlements related to site plan approval and permitting.			
PROPERTY ADDRESS	_	ipal question pertains to real property. *If checon is required.	cked, either a prop		
OR	13500 Lyndhurs		varie or riparement		
LEGAL DESCRIPTION	City		State	Zip Code	
	Austin	1	ГХ	78729	
	Property Legal I	Description			
Subject Matter(s)*: Check all s	ubject matters th	at apply to the municipal question above			
Accessibility or Persons with	th Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)	
Affordability		Finance, Budget, or Investments	Permits (Ot	her)	
Animals		Health, Healthcare, Mental Health, or Human Services		ry, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste	
Arts, Music, Film, Cultural Creative Industries	or	Hospitality, Tourism, Events, or Convention Center	Quality of L	-	
Aviation		Human Rights or Immigration	Real Estate		
City Infrastructure or Publi	c Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making	
Civil Service, Municipal Em Retirement Systems	ployment, or	□ Land Development or Land Use	Taxation or	Fees	
Code Compliance		Municipal Court	Technology	or Communications	
Construction		Municipal Legislation	☐ Transportat	cion or Mobility	
Contracts or Procurement		Neighborhoods	Zoning or P	latting	
Diversity, Equity, or Inclusi	on	Parks, Recreation, Libraries, or Museums			
Economic Development		Other:			



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To report more than one Munici	ipal Question, clic	k the "Add Additional	Municipal Question" bu	utton below.	
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to alternative equivalent compliance.				
PROPERTY ADDRESS	This municip description i		o real property. *If che	cked, either a pr	
OR	2425 East Riversi	de Dr.			
LEGAL DESCRIPTION	City			State	Zip Code
	Austin		-	тх	78741
	Property Legal De	escription			
Subject Matter(s)*: Check all sul	bject matters that	apply to the municip	pal question above		
Accessibility or Persons with	Disabilities	Environmental M Quality, or Water	atters, Air or Water shed Protection	Permits (	Building, Site Plans)
Affordability		Finance, Budget,	or Investments	Permits (	Other)
Animals		Health, Healthcar	e, Mental Health, or		fety, Policy, Fire, EMS, or cy Planning and Response
Annexation		Historic Preservat	tion	Public Uti or Recycli	ilities, Energy, Water, Solid Waste ing
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Touris	sm, Events, or Convention	_	f Life Affairs
Aviation		Human Rights or	Immigration	Real Esta	te
City Infrastructure or Public \	Works	Labor or Workfor	ce	Rules, Pro	oposed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or		nt or Land Use	Taxation	or Fees
Code Compliance		Municipal Court		Technolo	gy or Communications
Construction		Municipal Legisla	tion	Transport	tation or Mobility
Contracts or Procurement		Neighborhoods		Zoning or	Platting
Diversity, Equity, or Inclusion	1	Parks, Recreation	, Libraries, or Museums		
Economic Development		Other:			



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Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no clients reporting period	nt compensation during the applicable
CLIENT  NAME  Client is an individual	Client Title Client First Name*  Daniel  Organization Name or Client Last Name, as applicable*  Carl	Middle  Client Suffix
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*  4021-B Valley View Rd.  Client City*  Austin  Nature of Client's Business*  Real Estate Development	Client Apartment or Suite Number  Client State* Client Zip Code*  TX 78704

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  OR	(\$) Exact Amount		
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max			
	Disclosure of client compensation is not provided because such Disciplinary Rule 1.05 and Chapter 81 of the Texas Government			

\* Indicates a required field

Add Another Client Page



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Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Casa Garcia's		
	Client Business Address*	Client Apartment o	r Suite Number
_	1901 West William Cannon		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	ТХ	78748
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  OR	(\$) Exact Amount	
CO ENDATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Disclosure of client compensation is not provided because such Disciplinary Rule 1.05 and Chapter 81 of the Texas Government		

\* Indicates a required field

Add Another Client Page

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*  CZ Properties		
	Client Business Address*	Client Apartment	or Suite Number
	400 Bowie St.		
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code*
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  OR	(\$) Exact Amount	
CO ENDATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Disclosure of client compensation is not provided because such Disciplinary Rule 1.05 and Chapter 81 of the Texas Government		

\* Indicates a required field

Add Another Client Page



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### Section 3: Client

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For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Hotel Magdalena, LLC		
	Client Business Address*	Client Apartment o	r Suite Number
_	500 West 5th St.	#1210	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	RI	78701
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  (\$) Exact Amount  OR
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

\* Indicates a required field

Add Another Client Page



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For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*  Maple Multifamily TX Land TX, LP		
	Client Business Address*  3889 Maple Ave.	Client Apartment	or Suite Number
CLIENT  ADDRESS  AND  NATURE OF	Client City*  Dallas  Nature of Client's Business*	Client State*	Client Zip Code* 75219
BUSINESS	Real Estate Development		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  (\$) Exact Amount  OR
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

\* Indicates a required field

Add Another Client Page



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For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	1		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Music Lane JV, LLC		
	Client Business Address*	Client Apartment o	r Suite Number
_	500 West 5th St.	#1210	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	TX	78701
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  (\$) Exact Amount  OR
COMPENSATION	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

\* Indicates a required field

Add Another Client Page



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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Street Lights Residential, LLC		
	Client Business Address*	Client Apartment o	or Suite Number
	3102 Oak Lawn Ave.		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Dallas	TX	75219
NATURE OF BUSINESS	Nature of Client's Business*  Real Estate Development		

### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  (\$) Exact Amount  OR
COMPENSATION	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

\* Indicates a required field

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period					
CLIENT						
NAME						
Client is an individual	Organization Name or Client Last Name, as applicable*  Urban Genesis					
	Client Business Address*	Client Apartment	or Suite Number			
	600 Congress Ave.					
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code* 78701			
NATURE OF	Nature of Client's Business*					
BUSINESS	Real Estate Development					

### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  (\$) Exact Amount  OR				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):				
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.				

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

NO EMPLOYEES TO REPORT	☐ I employed or retained no employees during	the applicable reporting period
PERSON EMPLOYED OR RETAINED	Title First Name*  Last Name *  Employer*	Middle  Suffix  Occupation*
BUSINESS ADDRESS	Business Address*  City*	Apartment or Suite Number  State* Zip Code*
MAYOR/COUNCIL  RELATIVE  OR  HOUSEHOLD MEMBER	Is the person identified above related (within the th Council Member, or a member of their household, a If yes, describe the nature of their employment *requ  First Name of Mayor/Council Member  Lagrange 1. Lagrange 1. Lagrange 2. Lag	as defined in City Code Section 4-8-6(A)(5)?

\* Indicates a required field



If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



### Section 5: Statement of No Activity

#### STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED

Lobbyists who have **no reportable activity** for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the **No Activity Confirmation**, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

# No Activity Confirmation I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# **Section 6: Expenditure Totals**

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

	(\$) Reimbursement to Others
	(\$) Food and Beverages
	(\$) Transportation and Lodging
	(\$) Gifts (other than Awards and Mementos)
EXPENDITURE	(\$) Entertainment
TOTALS	(\$) Awards and Mementos
(Blank values will be interpreted as \$0)	(\$) Honorariums
	(\$) Attendance of Council Members at Charitable Events or Fundraisers
	(\$) Media Communications (broadcast, print, advertising, etc.)
	(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

PAYEE NAME AND	Organization Name or Payee Last Name,	as applicable*				
BUSINESS INTEREST	This payee is a business or business in	nterest of a City Official				
INTEREST	If yes, First Name of City Official	Las	Last Name of City Official			
Payee is an individual						
	Department of City Official	Job	Job Title of City Official			
	Payee Address/ PO Box*		Payee Apartmen	t or Suite Nun	nber	
PAYEE						
ADDRESS	Payee City*		Payee State*	Payee Zi	p Code*	
EXPENDITURE DETAILS	(\$) Expenditure Amount* Expendit  Purpose of the Expenditure*	cure Date* Category	<b>,*</b>			
	Taipose of the Experiantale					
Identify each City Official w	rho benefitted from or who may	/ have been influer	nced by the ex	kpenditure	, if applicable	
City Official First Name	City Official Last Name	Departmer	nt	Jo	ob Title	
Add Another Expenditure Page			Delete this	s page	24 Revised: 9/25/2017	



# Section 8: Declaration and Electronic Submission

#### **DECLARATION**

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

William W. Herring	10/10/2017
Typed Name	Report Date*

#### **Electronic Submission and Signature**

I have completed a **Lobbyist Contact Information Form**, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.



# The Following Report is the Corrected Report for Herring, William's October Quarterly Activity Report Submitted on 1/19/2018



Section 1: Cover Sheet

Office Use Only

#### Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Individual Reporting Guide

This form must be submitted in its original digital format. Please do not print or scan this form.

LOBBYIST NAME	Title First Name*  William  Last Name*  Herring  My employer is a 501c(3) non-profit organization	Suffix	Middle
EMPLOYING ENTITY	My employer is registered as a business entity, pays a behalf  Entity/Organization Name*  Metcalfe, Wolff, Stuart & Williams, LLP	n entity registratio	on fee, and is reporting on my
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Business Street Address*  221 West 6th St.  City*  Austin	Apartment or S #1300 State*  TX	Zip Code*
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailing Address*  221 West 6th St.  City*  Austin	Apartment or S #1300 State*  TX	Zip Code* 78701

	☐ I am registering as a new lobbyist				
	☐ I am renewing my annual lobbyist registration				
	☐ I am updating my current registration information outside of a Quarterly Activity Reporting Period				
REPORT TYPE *	I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:				
Check all that apply	☐January ☐ April ☐ July ☐ October				
	I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.				



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 2: **Municipal Question**

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one wunicip	oal Question, click	the Add Additional Municipal Question	n button below.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to proposed zoning and any related site permits.					
PROPERTY ADDRESS	This municipa description is Address	Il question pertains to real property. *If required.	checked, either a pro			
OR	3101 and 3003 Ma	ınchaca				
LEGAL DESCRIPTION	City		State	Zip Code		
	Austin		TX	78704		
	Property Legal Des	scription				
	Troporty Edgar Bos					
0 11 11 11 11 11 11 11 11 11 11 11 11 11						
Subject Matter(s)^: Check all sub	ect matters that	apply to the municipal question above				
Accessibility or Persons with I	Disabilities	Environmental Matters, Air or Water     Quality, or Watershed Protection	Permits (B	Building, Site Plans)		
Affordability		Finance, Budget, or Investments	Permits (C	Other)		
Animals		Health, Healthcare, Mental Health, or Human Services		ety, Policy, Fire, EMS, or y Planning and Response		
Annexation		Historic Preservation	Public Util or Recyclir	ities, Energy, Water, Solid Waste, ng		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Conver Center	ntion	Life Affairs		
☐ Aviation		Human Rights or Immigration	Real Estate	е		
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pro	posed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or		☐ Taxation o	or Fees		
Code Compliance		Municipal Court	Technolog	y or Communications		
Construction		Municipal Legislation	☐ Transport	ation or Mobility		
Contracts or Procurement		☐ Neighborhoods		Platting		
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Museur	ms			
Economic Development		Other:				

Add Additional Municipal Question

Delete this page

Page 3 of 24 Revised: 9/25/2017



### **Lobbyist Reporting Form**

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
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- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

		<u>'</u>				
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to rezoning and assistance with any site permitting.					
PROPERTY ADDRESS	This municipal description is	al question pertains to real property. *If chec required.	cked, either a pro	perty address or legal		
OR	Address	S	Suite or Apartment Number			
LEGAL DESCRIPTION	11500 Manchaca I	Rd.				
	City	<u>s</u>	State	Zip Code		
	Austin	Т	TX	78748		
	Property Legal De	scription				
Subject Matter(s)*: Check all sub	ject matters that	apply to the municipal question above				
Accessibility or Persons with I	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)		
Affordability		Finance, Budget, or Investments	Permits (Ot	her)		
Animals		Health, Healthcare, Mental Health, or Human Services		ty, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste, J		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convention Center	Quality of L	ife Affairs		
Aviation		Human Rights or Immigration	Real Estate			
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	yment, or	□ Land Development or Land Use	☐ Taxation or	Fees		
Code Compliance		Municipal Court	Technology	or Communications		
Construction		Municipal Legislation	☐ Transporta	tion or Mobility		
Contracts or Procurement		☐ Neighborhoods	Zoning or P	latting		
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Museums				
Economic Development		Other:				

Delete this page

Page 4 of 24 Revised: 9/25/2017



### **Lobbyist Reporting Form**

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

## Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

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- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

To roport more than one manier			Maditional Maniopal Education				
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to site plan permitting and demolition permit by Historic Landmark Commission.						
PROPERTY ADDRESS	∑ This municipal question pertains to real property. *If checked, either a property address or legal description is required.						
OR	Address			Suite o	Suite or Apartment Number		
LEGAL DESCRIPTION	1400 Lavaca						
	City			State		Zip Code	
	Austin			TX		78701	
	Property Legal Des	scription					
		•					
Subject Matter(s)*: Check all sub	icat matters that	annly to t	he municipal question above				
Accessibility or Persons with I	•	Envir	onmental Matters, Air or Water ty, or Watershed Protection	$\boxtimes$	Permits (Bu	ilding, Site Plans)	
☐ Affordability		Finan	ce, Budget, or Investments		Permits (Otl	her)	
Animals			h, Healthcare, Mental Health, or an Services			y, Policy, Fire, EMS, or Planning and Response	
Annexation			ric Preservation		Public Utiliti or Recycling	ies, Energy, Water, Solid Waste, I	
Arts, Music, Film, Cultural or Creative Industries		Hosp Cente	itality, Tourism, Events, or Conventicer	on _	Quality of Li	fe Affairs	
Aviation		Huma	an Rights or Immigration		Real Estate		
City Infrastructure or Public W	Vorks	Labor	r or Workforce		Rules, Propo	osed Rules, or Rule Making	
Civil Service, Municipal Emplo Retirement Systems	yment, or	∠ Land	Development or Land Use		] Taxation or	Fees	
Code Compliance		☐ Muni	cipal Court		] Technology	or Communications	
Construction		☐ Muni	cipal Legislation		] Transportat	ion or Mobility	
Contracts or Procurement		☐ Neigh	nborhoods		Zoning or Pl	atting	
Diversity, Equity, or Inclusion		Parks	, Recreation, Libraries, or Museums				
Economic Development		Othe	r:				

Delete this page

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### **Lobbyist Reporting Form**

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 2: **Municipal Question**

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municip	oal Question, click	k the "Add Additional Municipal Questio	n" button below.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to site plan approval and permitting.					
PROPERTY ADDRESS	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.					
OR			Suite of Apartmen	Suite or Apartment Number		
LEGAL DESCRIPTION	110 Academy					
	City		State	Zip Code		
	Austin		TX	78704		
	Property Legal De	escription				
	Troperty Legal Be	Surption				
Subject Matter(s)*: Check all sub	ject matters that	apply to the municipal question above				
Accessibility or Persons with I	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (E	Building, Site Plans)		
Affordability		Finance, Budget, or Investments	Permits (0	Other)		
Animals		Health, Healthcare, Mental Health, or Human Services		ety, Policy, Fire, EMS, or cy Planning and Response		
Annexation		Historic Preservation	Public Uti or Recycli	lities, Energy, Water, Solid Waste, ng		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convercence Center	ntion	Life Affairs		
Aviation		Human Rights or Immigration		е		
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pro	posed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or		☐ Taxation o	or Fees		
Code Compliance		Municipal Court	Technolog	gy or Communications		
Construction		Municipal Legislation	☐ Transport	ation or Mobility		
Contracts or Procurement		☐ Neighborhoods	Zoning or	Platting		
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Museum	ms			
Economic Development		Other:				

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

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- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below

To report more than one municip	bai Question, clici	tile Add Ad	dittorial ividilicipal Question	Dutton	JCIOW.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to zoning and site plan approval and permitting related to proposed Capitol View Corridor ordinance changes.							
PROPERTY ADDRESS	description is		ertains to real property. *If c					
OR	Address			Suite or	Suite or Apartment Number			
LEGAL DESCRIPTION	700 East 11th St.							
	City			State		Zip Code		
	Austin			TX		78701		
	Property Legal De	escription						
0.1:								
Subject Matter(s)*: Check all sub	ject matters that		• •					
Accessibility or Persons with	Disabilities		nental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Build	ling, Site Plans)		
Affordability		Finance,	Budget, or Investments		Permits (Othe	r)		
Animals		Health, I	Healthcare, Mental Health, or Services			Policy, Fire, EMS, or anning and Response		
Annexation		Historic	Preservation		Public Utilities or Recycling	s, Energy, Water, Solid Waste,		
Arts, Music, Film, Cultural or Creative Industries		Hospital Center	ity, Tourism, Events, or Conventi	on 🗌	Quality of Life	Affairs		
Aviation		Human I	Rights or Immigration		Real Estate			
City Infrastructure or Public V	Vorks	Labor or	Workforce	$\boxtimes$	Rules, Propose	ed Rules, or Rule Making		
Civil Service, Municipal Emplo Retirement Systems	oyment, or	∠ Land De	velopment or Land Use		Taxation or Fe	ees		
Code Compliance		Municip	al Court		Technology or	Communications		
Construction		Municip	al Legislation		Transportation	n or Mobility		
Contracts or Procurement		☐ Neighbo	rhoods	$\boxtimes$	Zoning or Plat	ting		
Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums	i				
Economic Development		Other:						



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 2: Municipal Question

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To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

To Toport Moro than one Manier	our Eurostron, onon	710071	aartionai mamoipai Quostion	Dutton k	,0.011.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to site plan approval and permitting including permanent encroachment agreement.							
PROPERTY ADDRESS	description is		pertains to real property. *If ch					
OR	Address			Suite or	Suite or Apartment Number			
LEGAL DESCRIPTION	1011 South Congre	ess						
	City					Zip Code		
	Austin			TX		78701		
	Property Legal De	scription						
Subject Matter(s)*: Check all sub	ject matters that	apply to the	municipal question above					
Accessibility or Persons with Disabilities			mental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Bui	lding, Site Plans)		
☐ Affordability		Finance	, Budget, or Investments	$\boxtimes$	Permits (Oth	ner)		
Animals			Healthcare, Mental Health, or Services	$\boxtimes$	Public Safety Emergency F	y, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic	Preservation		Public Utilities or Recycling	es, Energy, Water, Solid Waste		
Arts, Music, Film, Cultural or Creative Industries		Hospita Center	lity, Tourism, Events, or Convention	on 🗌	Quality of Lit	fe Affairs		
Aviation		Human	Rights or Immigration	$\boxtimes$	Real Estate			
City Infrastructure or Public Works		Labor o	r Workforce		Rules, Propo	osed Rules, or Rule Making		
Civil Service, Municipal Employment, or Retirement Systems		∠ Land Decomposition	evelopment or Land Use		Taxation or Fees			
Code Compliance		Municip	oal Court		Technology	or Communications		
Construction		Municip	oal Legislation	$\boxtimes$	Transportati	on or Mobility		
Contracts or Procurement		Neighbo	orhoods		Zoning or Pla	atting		
Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums					
Economic Development		Other:						



### **Lobbyist Reporting Form**

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 2: Municipal Question

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To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

To roport more than one manier	our Eurostron, onon	710	ad ridditional ividiliolpal Edostion k		001011.		
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to site plan approval and permitting.						
PROPERTY ADDRESS	<ul> <li>         ∑ This municipal question pertains to real property. *If checked, either a property address or legal description is required.     </li> <li>Address</li> <li>Suite or Apartment Number</li> </ul>						
OR		`+		Suite or Apartment Number			
LEGAL DESCRIPTION	13500 Lyndhurst S	ol.					
	City			State		Zip Code	
	Austin			TX		78729	
	Property Legal De	scription					
Subject Matter(s)*: Check all sub	ioct matters that	annly to	the municipal question above				
Accessibility or Persons with I		En\	vironmental Matters, Air or Water ality, or Watershed Protection	$\boxtimes$	Permits (Bui	ilding, Site Plans)	
Affordability		Fin	ance, Budget, or Investments		Permits (Oth	ner)	
Animals			alth, Healthcare, Mental Health, or man Services			y, Policy, Fire, EMS, or Planning and Response	
Annexation		His	toric Preservation		Public Utiliti or Recycling	ies, Energy, Water, Solid Waste,	
Arts, Music, Film, Cultural or Creative Industries			spitality, Tourism, Events, or Convention nter	n	Quality of Li	fe Affairs	
Aviation		Hui	man Rights or Immigration		Real Estate		
City Infrastructure or Public W	Vorks	Lab	oor or Workforce		Rules, Propo	osed Rules, or Rule Making	
Civil Service, Municipal Emplo Retirement Systems	yment, or	⊠ Lan	nd Development or Land Use		Taxation or	Fees	
Code Compliance		☐ Mu	inicipal Court		Technology	or Communications	
Construction		☐ Mu	nicipal Legislation		Transportat	ion or Mobility	
Contracts or Procurement		☐ Nei	ighborhoods		Zoning or Pl	atting	
Diversity, Equity, or Inclusion		Par	ks, Recreation, Libraries, or Museums				
Economic Development		Oth	ner:				

Delete this page

Page 9 of 24 Revised: 9/25/2017



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

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- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

To report more than one municip	Jai Question, click	tile Add Ad	iditional ividilicipal Question	button	DEIOW.			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Entitlements related to alternative equivalent compliance.							
PROPERTY ADDRESS	This municipal question pertains to real property. *If checked, either a property address or legal description is required.							
OR	Address			Suite or	Suite or Apartment Number			
LEGAL DESCRIPTION	2425 East Riverside Dr.							
	City			State	Zip Code			
	Austin	ıstin			78741			
	Property Legal Des	cription						
		•						
0.1								
Subject Matter(s)*: Check all sub	ject matters that a	,	• •					
Accessibility or Persons with Disabilities			nental Matters, Air or Water or Watershed Protection		Permits (Building, Site Plans)			
☐ Affordability		Finance,	Budget, or Investments		Permits (Other)			
Animals		Health, H	Healthcare, Mental Health, or Services		Public Safety, Policy, Fire, EMS, or Emergency Planning and Response			
Annexation		Historic	Preservation		Public Utilities, Energy, Water, Solid Was or Recycling	te,		
Arts, Music, Film, Cultural or Creative Industries		Hospital Center	ity, Tourism, Events, or Conventio	on 🗌	Quality of Life Affairs			
☐ Aviation		Human F	Rights or Immigration		Real Estate			
City Infrastructure or Public V	Vorks	Labor or	Workforce		Rules, Proposed Rules, or Rule Making			
Civil Service, Municipal Emplo Retirement Systems	yment, or	∠ Land Der	velopment or Land Use		Taxation or Fees			
Code Compliance		Municipa	al Court		Technology or Communications			
Construction		Municipa	al Legislation		Transportation or Mobility			
Contracts or Procurement		☐ Neighbo	rhoods		Zoning or Platting			
Diversity, Equity, or Inclusion		Parks, Re	ecreation, Libraries, or Museums					
Economic Development		Other:						



### Section 3: Client

### Section 3a:

**Client Information** 

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clier reporting period	nt compensation during the applicable
CLIENT NAME	Client Title Client First Name*  Daniel  Organization Name or Client Last Name, as applicable*	Middle  Client Suffix
Z sion is an inamedal	Carl	
	Client Business Address* 4021-B Valley View Rd.	Client Apartment or Suite Number
CLIENT ADDRESS	Client City*	Client State* Client Zip Code*
AND NATURE OF	Austin  Nature of Client's Business*	TX [78704
BUSINESS	Real Estate Development	

#### Section 3b:

### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*		(\$) Exact Amount			
	less than \$10,000	OR				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):  Conflict exists b/w reporting \$ pd by clients & TX Disciplinary Rule 1.05 & Ch. 81 of TX Govt Code.We reserve the right					
* Indicator a new incl field	to not provide more info until dispute is resolved or any info on future repts, if disclosures are determined to be prohibited.					

\* Indicates a required field

Add Another Client Page



# Section 3a:

**Client Information** 

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

I represented no clients and received no client compensation during the applicable reporting period		
Opening tion Name on Client Last Name on applicable *		
Casa Garcia's		
Client Business Address*  1901 West William Cannon	Client Apartment o	r Suite Number
Client City*	Client State*	Client Zip Code*
Austin	ТХ	78748
Nature of Client's Business*		
Real Estate Development		
	Organization Name or Client Last Name, as applicable*  Casa Garcia's  Client Business Address*  1901 West William Cannon  Client City*  Austin  Nature of Client's Business*	Organization Name or Client Last Name, as applicable*  Casa Garcia's  Client Business Address*  Client Apartment of 1901 West William Cannon  Client City*  Austin  Nature of Client's Business*

#### Section 3b:

### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*		(\$) Exact Amount
CLIEIVI	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):  Conflict exists b/w reporting \$ pd by clients & TX Disciplinary Rule 1.05 & Ch. 81 of TX Govt Code.We reserve the right		
* Indicator a new incl field	to not provide more info until dispute is resolved or an prohibited.	y info on t	future repts, if disclosures are determined to be

Indicates a required field

Add Another Client Page



### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*  CZ Properties		
0.151.7	Client Business Address* 400 Bowie St.	Client Apartment or	Suite Number
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	ТХ	78703
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

# Section 3b:

### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Conflict exists b/w reporting \$ pd by clients & T to not provide more info until dispute is resolve prohibited.		e 1.05 & Ch. 81 of TX Govt Code.We reserve the right future repts, if disclosures are determined to be
* Indicatos a required fiel	1		

\* Indicates a required field

Add Another Client Page



# Section 3a:

#### **Client Information**

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client reporting period	compensation duri	ng the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Hotel Magdalena, LLC		
	Client Business Address*	Client Apartment or	Suite Number
	500 West 5th St.	#1210	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	RI	78701
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		
			,

#### Section 3b:

### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*		(\$) Exact Amount
CLIEIVI	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):  Conflict exists b/w reporting \$ pd by clients & TX Disciplinary Rule 1.05 & Ch. 81 of TX Govt Code.We reserve the right		
* Indicator a new incl field	to not provide more info until dispute is resolved or an prohibited.	y info on t	future repts, if disclosures are determined to be

\* Indicates a required field

Add Another Client Page



### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\hfill \square$ I represented no clients and received no client compensation during the applicable reporting period		
	<u> </u>		
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
onone is an inarriadar	organization Nume of official East Nume, as applicable		
	Maple Multifamily TX Land TX, LP		
	Client Business Address*	Client Apartment of	r Suite Number
OLIFALT.	3889 Maple Ave.	#200	
CLIENT	011	*	011 171 0 1 *
ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Dallas	TX	75219
NATURE OF			
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

# Section 3b:

### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation in	formation	, provide your reason(s) (250 char. max):
	Conflict exists b/w reporting \$ pd by clients & TX Discipto not provide more info until dispute is resolved or an prohibited.		

\* Indicates a required field

Add Another Client Page



# Section 3a:

**Client Information** 

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Music Lane JV, LLC		
CLIENT	Client Business Address*  500 West 5th St.	Client Apartment of #1210	
ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	ТХ	78701
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

#### Section 3b:

### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*		(\$) Exact Amount
CLIEIVI	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):  Conflict exists b/w reporting \$ pd by clients & TX Disciplinary Rule 1.05 & Ch. 81 of TX Govt Code.We reserve the right		
* Indicator a new incl field	to not provide more info until dispute is resolved or an prohibited.	y info on t	future repts, if disclosures are determined to be

Indicates a required field

Add Another Client Page



# Section 3a:

#### **Client Information**

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client reporting period	compensation dur	ing the applicable
CLIENT NAME	•		
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Street Lights Residential, LLC		
CLIENT	Client Business Address* 3102 Oak Lawn Ave.	Client Apartment or	Suite Number
	Client City*	Client State*	Client Zip Code*
ADDRESS AND	Dallas	TX	75219
NATURE OF	Nature of Client's Business*		
BUSINESS	Real Estate Development		

#### Section 3b:

### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Conflict exists b/w reporting \$ pd by clients & T to not provide more info until dispute is resolve prohibited.		e 1.05 & Ch. 81 of TX Govt Code.We reserve the right future repts, if disclosures are determined to be
* Indicatos a required fiel	1		

\* Indicates a required field

Add Another Client Page



# Section 3a:

**Client Information** 

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\hfill \square$ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME  Client is an individual	Organization Name or Client Last Name, as applicable*  Urban Genesis		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*  600 Congress Ave.  Client City*  Austin  Nature of Client's Business*  Real Estate Development	Client Apartment or  Client State*  TX	Client Zip Code*

#### Section 3b:

### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Conflict exists b/w reporting \$ pd by clients & TX Disciplinary Rule 1.05 & Ch. 81 of TX Govt Code.We reserve the right to not provide more info until dispute is resolved or any info on future repts, if disclosures are determined to be prohibited.		
* Indicatos a required field			

\* Indicates a required field

Add Another Client Page



# Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

	I			
NO EMPLOYEES TO REPORT	☐ I employed or retained no employee	es during the applicable re	porting period	
	Title First Name*		Middle	
PERSON				
EMPLOYED	Last Name *	Suffix		
OR				
RETAINED	Employer*	Occupation*		
	Business Address*	Apartment or	Apartment or Suite Number	
BUSINESS				
ADDRESS	City*	State*	Zip Code*	
MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER	☐ Is the person identified above related (within the third degree of consanguinity) to the Mayor or a Council Member, or a member of their household, as defined in City Code Section 4-8-6(A)(5)?  If yes, describe the nature of their employment *required if the above box is checked			
	First Name of Mayor/Council Member	Last Name of Mayor/	Council Member	

\* Indicates a required field

Sections 5, 6 and 7 are for filing Quarterly Activity Reports or a Termination of Lobbyist Registration.

If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



# Section 5: Statement of No Activity

#### STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED.

Lobbyists who have no reportable activity for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the No Activity Confirmation, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

# No Activity Confirmation ☐ I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



# Section 6: Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

	(\$) Reimbursement to Others
EXPENDITURE TOTALS (Blank values will be interpreted as \$0)	(\$) Food and Beverages
	(\$) Transportation and Lodging
	(\$) Gifts (other than Awards and Mementos)
	(\$) Entertainment
	(\$) Awards and Mementos
	(\$) Honorariums
	(\$) Attendance of Council Members at Charitable Events or Fundraisers
	(\$) Media Communications (broadcast, print, advertising, etc.)
	(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)



# Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

Add Another Expenditure Page

PAYEE NAME	Organization Name or Payee Last Name,	as applicable*		
AND				
BUSINESS INTEREST	This payee is a business or business in	nterest of a City Official		
li .	If yes, First Name of City Official	Last	t Name of City O	fficial
Payee is an individual				
	Department of City Official		Job Title of City Official	
	Payee Address/ PO Box*		Payee Apartme	ent or Suite Number
PAYEE				
ADDRESS	Payee City*		Payee State*	Payee Zip Code *
	(\$) Expenditure Amount * Expendit	ure Date* Category	,*	
EXPENDITURE	(\$) Experiantile Amount Experiant	ure Date Category	<u> </u>	
DETAILO				
DETAILS	Purpose of the Expenditure*			
	ho benefitted from or who may			
City Official First Name	City Official Last Name	Departmen	nt	Job Title

Delete this page

24 Revised: 9/25/2017



# Section 8: Declaration and Electronic Submission

#### **DECLARATION**

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

William W. Herring	1/19/2018
Typed Name	Report Date*

#### **Electronic Submission and Signature**

I have completed a Lobbyist Contact Information Form, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.